

INDIANA ENVIRONMENTAL STEWARDSHIP PROGRAM ANNUAL PERFORMANCE REPORT

State Form 53475 (11-07)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ENVIRONMENTAL STEWARDSHIP PROGRAM

Indiana Department of Environmental Management

Office of Pollution Prevention and Technical Assistance 100 North Senate Avenue IGCS W041 Indianapolis, IN 46204-2251

Telephone: (800) 988-7901 FAX: (317) 233-5627 E-mail: esp@idem.lN.gov www.in.gov/idem/prevention/esp

When to use this annual report form...

STOP! Is your facility a member of the U.S. Environmental Protection Agency's National Environmental Performance Track and Indiana Environmental Stewardship Program? If so, please use the U.S. EPA National Environmental Performance Track Annual Performance Report form available at http://www.epa.gov/performancetrack/program/report.htm. The U.S. EPA will notify IDEM after receiving your annual performance report.

GOI Please use this annual report form if you are only a member of the Indiana Environmental Stewardship Program and not a member of the National Environmental Performance Track. Your Annual Performance Report should be reviewed and signed by a senior manager at your facility prior to submittal. Once signed, fax, mail, or e-mail the report to IDEM. If you have any questions, please contact the ESP Program Manager at 800-988-7901.

The Indiana Environmental Stewardship Program (ESP) Annual Performance Report should demonstrate progress toward objectives and targets AND certify ESP requirements continue to be achieved. The Annual Performance Report should cover the twelve (12) month calendar year and include the status of projects committed to in your facility's original ESP application, results of completed projects, and assurance that an annual internal environmental management system audit was conducted by your facility. Indiana ESP facilities must submit an Annual Performance Report by April 1st of every year, for each calendar year in which the entity has been a member for at least three (3) full months.

Please do not include any confidential business information in your Annual Performance Report. Public access laws require IDEM to make the Annual Performance Report publicly available, which may include posting all portions of your report on the Indiana ESP Web site.

SECTION A FACILITY INFORMATION
Name of Facility I CON Metal FORMING LLC
Name of Parent Company (If applicable) MARTINIE International
Street Address (number and street) 2190 Land mark Aul
City/State/ZIP Code CORY don IND 47/12
Facility/Company Web site Martinea. Com
CONTACT INFORMATION
Contact Name (Mr./Mrs./Ms./Dr.) KASIA HEIKES
Title HR MANAGER
Telephone number 812-738 4 5918
FAX number 8/2-738.4029
E-mail address Kasia heikes @ Martinra. com
Mailing Address (if different from facility address)
City/State/ZiP Code
Reporting Period Dates 2008
If this is your third Annual Performance Report, do you wish to renew your Indiana Environmental Stewardship Program membership? YesIf yes, please complete all sections of this annual report.
□ NoIf no, you can skip Section D of this annual report.
CHANGE IN INFORMATION
In your ESP application and, perhaps, in previous annual performance reports, you described what your facility does or makes. Have there been any changes or additions to your facility's list of products or activities? If so, please list them in the space below. Tyes No

SECT			MENT SYSTEM ASSESSMENT
		o we need this information?	What do you need to do? 🛝
IDEM	ne	needs information on the performance and assessment so of your Environmental Management System (EMS).	Please summarize your facility's EMS assessments.
			Attach additional sheets as necessary.
		Chrehnete,	Year: 2008
Ĵ	X.	Yes	Year: QOO O
. ~	•	a. If yes, when was an EMS audit or other assessment last	Type: I Scape I know They
		conducted by an independent third party at your facility?	Scope: NOT Sure of practice day All
		Please provide the type (e.g., ISO 14001 certification),	Type: ISO 1400 1 Scope: NOT Sure of exact Scope I know they Month: February 25-2008 touched on all water flow, I ne
г	7	scope, and month of the last assessment.] No	Water + 1800, 11 No
	_	b. If no, when was an internal or corporate EMS audit last	Year: Pipes i Selfceric
		conducted at your facility? Please provide the scope and	Scope: Sastem
		month of the last assessment.	· · · · · · · · · · · · · · · · · · ·
		110	Month:
2			Year: 2008
		compliance audit? Please provide the scope and month(s) of each audit, and indicate who conducted the audit(s) (e.g., facility staff,	Scope: The General Aspect of Environmental
		corporate groups, third party). Do not include audits, inspections, or	Month(s): 141/1981 14-2008 Chicks OR
		site visits by regulatory organizations.	DE LA LANGE LA
		(Ontlevel) Plans describe and the state of t	Who: Scali Consulting mount Freeling
3	•	(Optional) Please describe any other audits that were conducted at your facility.	We HAVE reflety kan that Queits once i
4	-		(44.7)
			Madi Sure of disposal of oil makedon
*	1.	✓ assessments?	Made Sure of disposan of oil makagin
- 1	X,	Yes	
		a. If yes, briefly summarize corrective actions taken and other improvements made as a result of your EMS	Cleaned up all anexes fround the
		assessment(s) or compliance audit(s).	Comment of all the productions
			Vanta lebers.
] [No	
	. '	b. If no, please explain your plans to correct these instances.	de lu la libola da
Г	٦,	No such instances identified.	Changed Water WASTE Company for
•			Truckle O Olegen to Salty Klein.
. 5.		Explain the emergencies experienced within the facility during the	
		past year. Were the applicable emergency and contingency plans	All Dlans are Jam & NO Changes
		detailed in the EMS effective? What changes, if any, have been made to your facility's emergency or contingency plans?	in plans we share no charge.
6.		When was the last Senior Management review of your EMS	Month/Year: November - 200-7
		completed?	Who headed the review? Name and Title:
			harry what 16 U
7.	•	When did your facility last conduct a systematic identification or review of your environmental aspects?	Month/Year February 2008
-10	0.		Environmental Aspect Progress Made This Year
		toward EMS objectives and targets other than those reported as an	(e.g., quantitative or qualitative
		Environmental Performance Initiative in the following section. You	improvements, activities conducted)
		may limit the summary to environmental aspects that are significant	
		and towards which progress has been made during the last calendar, year. Attach additional sheets as necessary.	
•		y and a manufacture of the control o	
			The state of the s
			그는 사람들은 그들은 사람들은 사람들이 되었다. 그 사람들은 사람들은 사람들은 사람들은 사람들이 되었다.

SECTION C	ENVIRONMENTAL	. IMPROVEMENT INITIATIVE	RESULTS	
Why do we need this information Facilities need to share the results	? of the environmental	\(\frac{1}{2}\)	se the following table to summari	What do you need to do? ze your facility's environmental
improvement initiative that was purs Category: (1046)	sued during the reporting perior	3. performance a	as compared to your ESP enviror	mental improvement initiative.
Aspect:				
Specific Information on Aspect (opti		Progress during year	Environmental Improvement	Cost Savings
	Baseline	20 <u>0</u> 8	Initiative Goal	(if applicable)
Actual Quantity (per year)	2.866.900		7%	Due to the
Measurement Unit	aAllons	······································	, , -	810 wind Econo
Normalized Quantity (per year)	5.502/09 22			workers were 14
Basis for your Normalizing Factor (e.g., gallons of paint produced)	- 11	INERS		usose dropped gi
Briefly describe how you achieved in	mprovements for this aspect or	if relevent, any circumstance	s that delayed progress.	1 113 our 790 s
we HAVE Chang			and original	TIN Stalloof
- Rales much.	Draffile the Ne	Attun 1.12 Co	moned Novem	24 - 2008
Please list any state, EPA, or other	partnership programs to which	you are reporting this data (e.	g., Energy Star, Project XL). Fe	b 2007 Auto told
	N/A	7	m	sher installed in
(Optional) If your facility has experie those results here.	enced continued results for env	ironmental Improvement initiat	ives pursued in past years of ES	P membership, please share
mose leadits fiele.	NA			

SECTION D	EMVIDO	NMENTAL IMPROVEMENT I	AUTIATIVES	
Why do we need this information' Facilities need to demonstrate their	? commitment to	MANIELA LAC SIMIL KOVEIMENT I		What do you need to do? ironmental Performance Table.
improving environmental performant For ESP membership, you must ide		provoment initiatives for each	2 years manche robin town One (d) (-10-4), labora(G-1)
the application and the remaining wi questions. Choose an indicator fron Performance Indicator Table is prov select for your initiative should be re environmental impact in your EMS. sure how your objectives and targets IDEM at 800-988-7901.	Ill be identified each year in the n the Environmental Performan ided with the ESP Application a ilated to the objectives and targ No more than two of your indic	annual report. Identify the ne ice Indicator Table to measure and is also available at http://w lets in your EMS. Where poss afors can be from the same e	w initiative that will begin this yea the identified environmental initi ww.in.gov/idem/prevention/espit sible, indicators should also be identified the nvironmental category during the	ar by answering the following ative. The Environmental able doc. The indicator you entified as having a significant 13-year term. If you are not
Please complete the following quest information is required for air, hazard	ions according to the environm dous waste, solid waste, and e	ental indicator you selected fron	om the Environmental Performan	ice Indicator Table. Additional
1a What category have you selected please turn to Appendix 1 to co	l from the Environmental Perfo Implete additional questions pe	mance Table? (If the categor rtaining to the category you ha	ry is Energy Use, Waste, or Air E ave selected.)	missions for Total GHGs,
1b What indicator have you selected	from the Environmental Performance	rmance Table? Nater /	TOTAL WATER	used.
1c All measurements should represe focus your initiative on a specific waste component). Does your in substance, or component (e.g., e.g., All	subset of the indicator (e.g., a : itiative include everything cove	specific material, process, VO	acility. For many indicators, you r	r particular
If your initiative is specific to a s waste company ()	ubstance or component, please) e provide additional detail on y	our indicator (e.g., specific chem	sical to be reduced, specific
1d What activities or process chang fine, employee training?	U 11 0*	, •	tinitiative lego., technology char he system should	nges in a particular process Switches operato Nidoc 408 Cost
26 thno, please explain why you beli	, and bling Al	sto to reuse 4	he water which	is environtaly
Stop! If the category listed in Questi to complete the questions pertain regarding your facility's environn	ning to the category you listed.	r Air Emissions for Total GHG After completing Appendix 1,	s, please skip Questions 3a – 3b return to question 4 and comple	below and turn to Appendix 1 te the remaining questions

3a What units are you using to quantify this indicator? (Please refer to the Environmental Performance Indicator Table for the acceptable units for each indicator.)
3b List the baseline annual quantity of the indicator and the annual quantity you are committing to achieve by the future year. Baseline quantity 3, 866, 900 BALLOR'S Year 2008 Future year quantity (not including production) 2,000,000 Year 2009
Does the quantity presented in the future quantity column represent an absolute goal or a normalized goal? Normalized goal (i.e., indexed to level of business in baseline year) Absolute goal (i.e., demonstrates improvement even if production increases)
5 Whether your goal is absolute or normalized, you will need to provide normalizing factors and normalized quantities in your annual performance reports. Please briefly describe your basis for normalizing. Examples of potential normalizing basis include: gallons of paint produced, square feet of circuit boards sold, number of patients seen, dollars of sales adjusted for inflation, or number of employees (for R&D and administrative sites only). # OF employees in plant / warffs 55000,00
6a Are you subject to Federal, State, tribal, or local regulatory requirements for this indicator? Yes No
6b If yes, explain how your initiative exceeds regulatory requirements.
SECTION E Why do we need this information? IDEM needs to know how environmental information was shared with the public. PUBLIC OUTREACH AND PERFORMANCE REPORTING What do you need to do? Describe how the facility has shared and plans to share environmental information.
Please indicate which of the following methods your facility plans to use the make its ESP Annual Performance Report available to the public. Please check as
many as appropriate.
Website (http://www.) \bigcirc
☐ Meetings
☐ Press Releases
☐ Community Advisory Panel ☐ Other
SECTION F Why do we need this information? This information will help IDEM to effectively manage the Environmental Stewardship Program. ADDITIONAL INFORMATION What do you need to do? Answer the questions as completely as possible.
 In addition to ESP, please list environmental awards received or voluntary programs participated in during the past twelve months (include information about each particular program).
2. Has your facility taken advantage of any ESP incentives? If so, please describe the implementation process and list additional benefits IDEM should consider.
3. If your facility was not registered to the ISO 14001 standard prior to becoming an ESP member, has ESP helped you to pursue registration? If so, how has ESP been instrumental in achieving registration?
4. Explain the measured or perceived results from receiving, documenting, and responding to external communication.
5. How have community residents and businesses reacted to your facility participating in the Indiana Environmental Stewardship Program? / L OOH BUILUE OM ONE MOWS WE ARE a member.
6. According to the measurement program developed and implemented by your facility to measure Environmental Management System success, is your facility's EMS successful? Why or why not? If not, what changes will be made to ensure continual environmental improvement and future EMS success? NOT VET. The PROGRAM NAS went through 3 toam
Morbers, Decause, of illness, and lay offs, So we
Really are Streeting fresh once again.

CERTIFICATION AND PLEDGE

On behalf of

(name of facility),

I certify that the information contained in this Annual Performance Report and attachments is accurate to the best of my knowledge and that this facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with all applicable federal, state, and local environmental requirements, or has a corrective action program in place to attain compliance.

We, commit to maintaining the principles and goals outlined in our Environmental Management System for our facility's Indiana Environmental Stewardship Program status. We agree to strive for full compliance with all regulations promulgated by the U.S. EPA, state, or local jurisdictions. We agree to promote the Indiana Environmental Stewardship Program and to share our success stories with other facilities. We understand that the Annual Performance Report must be submitted to IDEM by April 1st of each year and that we must reapply to the Indiana Environmental Stewardship Program every three years.

I understand that the information provided in this Annual Performance Report will be public record. I am the senior facility manager or authorized facility signatory, and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is submitting this Annual Performance Report.

Signature

Title Plant Lorder

Date (month, day, year)

APRIL 1, 2009

Please mail, fax, or e-mail your completed Environmental Stewardship Program Annual Performance Report to:

IDEM-OPPTA ESP Program Manager MC 64-00 IGCS W041 100 North Senate Avenue Indianapolis, IN 46204-2251

FAX: 317-233-5627 E-mail: esp@idem.IN.gov

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